

Receipt #: _____

Amt _____

Check # _____

By: _____

Date: _____

TO BE FILLED OUT BY
ENVIRONMENTAL HEALTH DEPT

Placer County
Department of Health and Human Services
Environmental Health Services
3091 County Center Dr., Suite 180, Auburn CA 95603 (530) 745-2300
Tahoe Office: P O Box 1909, Tahoe City CA 96145 (530) 581-6240

UST/SOLID WASTE PROGRAMS
Permit Application for:
WELL CONSTRUCTION/DESTRUCTION

1. SR # _____

2. SR # _____

3. SR # _____

4. SR # _____

5. SR # _____

6. SR # _____

TO BE FILLED OUT BY ENV. HLTH DEPT

*****WELL DESIGNATIONS AS SHOWN ON PLOT PLAN*****

1. Well ID	2. Well ID	3. Well ID
4. Well ID	5. Well ID	6. Well ID

Project Name	Project Address	Location
Well Owner (project owner)	Well Owner Address	Telephone
Consultant's Name	Consultant's Address	Telephone
Consultant's Registration		

If the well is to be located on ADJOINING OR NEARBY PROPERTY owned by another person, you must have that off-site property owner complete the acknowledgement below or attach copies of access agreements/encroachment permits.

ACKNOWLEDGEMENT OF OFF-SITE PROPERTY OWNER

I have read this application form and I approve of the construction of this proposed well

Offsite Well Address	
Property Owners Name and Address	Telephone
Property Owners Signature	Date

SUBMITTED SIGNATURE MUST BE ORIGINAL

Please indicate type of well:

- | | |
|---|--|
| <input type="checkbox"/> Groundwater Monitoring | <input type="checkbox"/> Exploratory Boring /Hydropunch/Geoprobe (indicate how many) _____ |
| <input type="checkbox"/> Water Extraction | <input type="checkbox"/> Other (specify) _____ |
| <input type="checkbox"/> Vapor Extraction | <input type="checkbox"/> Well Destruction |
| <input type="checkbox"/> Gas Probe | <input type="checkbox"/> Vadose/Lysimeter |

PURPOSE OF WELL (if not explained in workplan) _____

Construction Specifications:

- ☐ Workplan Attached
- ☐ Workplan Previously Submitted - Workplan date _____
Prepared by _____

**DRILLING CONTRACTOR
INFORMATION AND CERTIFICATION**

Project Name: _____
Drilling Company Name: _____ C-57 License No. _____
Drilling Company Address: _____ Phone # (____) _____
Fax # (____) _____

A. NOTICE TO DRILLING CONTRACTOR: The Environmental Health Division shall be notified at least 48 hours in advance of drilling to schedule the REQUIRED inspections.

B. DRILLING CONTRACTOR'S WORKERS COMPENSATION DECLARATION
(ONE of the following three boxes must be completed)

- ☐ 1. A certified copy of Worker's Compensation Insurance is hereby furnished.
- ☐ 2. A current effective certificate is filed with Placer County Building Department or Environmental Health Division.
- ☐ 3. I certify that in performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the California Worker's Compensation Act.

C. If well is located in or may otherwise obstruct public right-of-way, an encroachment permit is required.

D. Location and clearance of underground and aboveground utilities is the responsibility of the permittee.

I HAVE READ AND UNDERSTAND THE FOREGOING STATEMENTS (A, B & C) AND CERTIFY THAT ALL RELEVANT ACTIVITIES WILL BE PERFORMED IN COMPLIANCE WITH THESE STATEMENTS AND APPLICABLE CODES AND REGULATIONS. I HAVE SHOWN ALL EASEMENTS ON THE PROPERTY.

Well Drilling Contractor Signature _____ Date _____

FOR OFFICIAL USE ONLY

☐ RWQCB Concurrence Received

This permit is issued subject to the following conditions. If these conditions are not satisfied, this approval/permit is null and void.

1. Monitoring wells shall be destroyed as required by the Environmental Health Division or R.W.Q. C. B.
2. Monitoring wells shall be capped and locked at all times except during sampling.
3. This permit expires one (1) year after date of issuance, but may be renewed for a fee if application is made PRIOR to expiration date.
4. All wells shall be constructed/destroyed pursuant to the standards set forth in the State of California Water Well Standards, Bulletin 74-90.

When signed by Placer County Environmental Health Division authorized representative, the application constitutes a PERMIT TO CONSTRUCT the subject well as herein specified:

Permit Issued by: _____ Date _____

Seal Inspection Date: _____ Comments: _____



**OFFICE OF THE
Placer County Health & Human Services
ENVIRONMENTAL HEALTH
SERVICES**

**3091 County Center Dr., Suite 180
Auburn, CA 95603
(530) 745-2300, FAX (530) 745-2352**

WELL DRILLER'S AUTHORIZATION LETTER

Site Address: _____

City, Zip: _____

Well Driller: _____

Driller's Address: _____

City, Zip: _____

Driller's Phone #: _____

C-57 License #: _____ Expiration Date: _____

For the sole purpose of procuring permits for the construction, modification, repair, or destruction of wells or soil borings. I hereby designate the following entity(ies) to act as my authorized representatives:

Name(s): _____

Company: _____

Address: _____

City, Zip: _____

I understand that, as the applicant for permit for activities regulated under Subchapter 8 of the Placer County Code, I am responsible for compliance with all provisions of the Chapter. I further understand that, upon written notification to the Division of Environmental Health, I may rescind this authorization:

Signature of Licensed Well Driller: _____

Printed Name: _____

Date: _____

EFFECTIVE 7/1/06

**PLACER COUNTY
DIVISION OF ENVIRONMENTAL HEALTH**

**UST Program
Monitoring Well/Boring Application
General Instructions**

- ❑ First Page –
 - Well Construction or Destruction – Fill out “Well.ID” designations (e.g. MW-1, MW-2, etc.). Up to six wells can be designated per page. Add more pages for additional wells.
 - Borings (includes geoprobes, temporary vapor probes) - Only one application is needed for any amount installed at the same site for one site investigation phase. If the investigation includes wells and borings, the borings should be on a separate application from the wells.
 - For off-site drilling, the wells/borings located on an off-site property need to be on an application specific to that property. The “acknowledgement of off-site property owner section” should be completed or copies of access agreements or encroachment permits may be attached instead.
 - Indicate type of wells, borings, or if the application is for well destruction.
 - Construction Specifications - A site plan is required to be submitted with the application. A workplan is also required, either submitted with the permit application or referenced in this section if it has been submitted previously. The workplan includes:
 - Scaled site plan indicating the property lines, proposed drilling locations, structures, locations of water lines, sewer lines and leachfields.
 - Well construction details, ie. drill rig type, boring and casing size, depth, etc.
 - Sealing materials and methods for borings and wells.
 - Well destruction methods and materials.
 - Management of drill cuttings.
- ❑ Second Page – Driller information and workers compensation section must be completed and signed by the licensed driller or authorized designee as discussed below.
- ❑ Third Page - “Well Driller’s Authorization Letter” - required only when the drilling contractor wishes to designate someone other than the driller to sign the permit.
- ❑ Fees (see fee schedule attached)
 - Well construction/destruction fees are charged on a per well basis.
 - Boring fees are charged at a flat rate after the first boring.
 - Fees are adjusted annually on July 1.
 - **Double fees are applicable to drilling activities performed without the appropriate permits.**

Notes: - Shallow hazardous borings may be exempt from permit requirements depending on site specific conditions - contact this office for details.
- This office does not issue permits for monitoring wells within the city limits of Roseville. Please contact Roseville Environmental Utilities Department for permitting instructions.

Monitoring Well and Soil Boring Fees

Monitoring Wells:

For each Monitoring Well Construction or Destruction	\$ 245.00
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Soil Borings:

1 Soil boring	\$ 245.00
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2 or more soil borings	\$ 490.00 (Maximum)
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